

**DEVINE H.S. BAND
ALTERNATIVE STUDENT TRAVEL FOR SCHOOL EVENT**

My son/daughter, _____ needs to go to and/or return
Student Name

from: _____
Destination of Trip

with _____ by _____
*Adult Driver's Name ** *car, bus, etc.*

at _____ on _____
Departure time *Date of School Event*

The reason for this alternative method of travel is:

I hereby release and hold harmless the Devine Independent School District, its Trustees, employees, and agents from any and all liability in connection with this alternative method of travel for this school trip.

Parent or Guardian Signature

Date

Approved

Disapproved

Signature of Director of Bands or School Administrator

Date

* Student drivers holding a valid driver's license MAY NOT transport any student other than themselves.